

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Charles Joel Arntzen §  
Dominic Man-Kit Lam §  
SERIAL NO.: 08/479,742 § GROUP NO.:  
FILED: June 7, 1995 § EXAMINER:  
FOR: Vaccines Expressed in Plants §

Attorney Docket No.: 1621-00206  
Date: August 22, 1996

**TRANSMITTAL OF COMBINED DECLARATION AND  
POWER OF ATTORNEY OF CHARLES J. ARNTZEN**

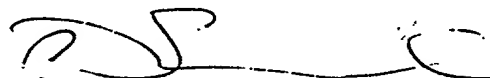
Assistant Commissioner for Patents  
Washington, DC 20231

Sir:

Transmitted herewith for filing in the above-identified matter is a *Combined Declaration and Power of Attorney* signed by Charles J. Arntzen, with a copy of the specification, claims, drawings and preliminary amendment attached. By this filing, Dr. Arntzen joins in the prosecution of this application, as provided under 37 C.F.R. § 1.47(b).

Applicants believe that no fee is due as a result of filing this paper. If the Commissioner deems that a fee is owing, please charge the same to Deposit Account No. 03-2769 of Conley, Rose & Tayon, P.C., Houston, Texas.

Respectfully submitted,



C. Steven McDaniel  
Reg. No. 33,962  
Conley, Rose & Tayon, P.C.  
P. O. Box 3267  
Houston, Texas 77253-3267  
(713) 238-8010 Fax (713) 238-8008  
ATTORNEY FOR APPLICANTS

**CERTIFICATE OF MAILING (37 CFR 1.8a)**

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class U.S. Mail in an envelope addressed to the: Assistant Commissioner for Patents, Washington, D.C. 20231.

8-23-96  
(Date)

C. STEVEN MCDANIEL  
(Printed name of person mailing paper)

  
(Signature of person mailing paper)

COMBINED DECLARATION AND POWER OF ATTORNEY  
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,  
CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

The declaration is of the following type: (check one applicable item below)

- ☒ original  
☐ design  
☐ supplemental

**NOTE:** If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application, do not check next item; check appropriate one of last three items.

- ☐ national state of PCT

**NOTE:** If one of the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP.

- ☒ divisional  
☐ continuation  
☒ continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

**WARNING:** If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

VACCINES EXPRESSED IN PLANTS

SPECIFICATION IDENTIFICATION

The specification of which: (complete (a), (b) or (c))

(a) ☒ is attached hereto

(b) ☐ was filed on \_\_\_\_\_ as ☐ Serial No. 0\_\_\_/\_\_\_\_\_ or ☐ Express Mail No., as Serial No. not yet known \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

**NOTE:** Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.

(c) ☐ was described and claimed in PCT International Application No. \_\_\_\_\_ filed on \_\_\_\_\_ and as amended under PCT Article 19 on \_\_\_\_\_ if any).

#### ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information

- ☒ which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56

*(also check the following items, if desired)*

- ☒ and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and
- ☐ in compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.

#### PRIORITY CLAIM (35 U.S.C. § 119)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

*(complete (d) or (e))*

- (d) ☐ no such applications have been filed.
- (e) ☒ such applications have been filed as follows.

**NOTE:** Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

#### A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS  
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

PCT/US94/02332

4 March 1994

**NOTE:** If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national state, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. § 120.

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. *(List name and registration number)*

Ned L. Conley	19,204	Gregory L. Maag	32,363
Kevin L. Daffer	35,146	Eric B. Meyertons	34,876
Michael F. Heim	32,702	Leslie V. Payne	P38,267
Shawn Hunter	36,168	David A. Rose	26,223
Bruce Noël Kivlin	33,929	Jeffrey W. Tayon	30,717
C. Steven McDaniel	33,962	Marcella W. Watkins	36,962

*(check the following item, if applicable)*

- ☐ Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

C. Steven McDaniel  
Conley, Rose & Tayon, P.C.  
P.O. Box 3267  
Houston, Texas 77253-3267

DIRECT TELEPHONE CALLS TO:  
(Name and telephone number)

C. Steven McDaniel  
(713) 238-8010

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

Full name of sole or first inventor:

CHARLES

JOEL

ARNTZEN

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

FAMILY (OR LAST NAME)

Inventor's signature: Charles J Arntzen

Date: \_\_\_\_\_

Country of Citizenship: U.S.A

Residence: The Woodlands, Texas

Post Office Address: 58 Bridgeberry, The Woodlands, Texas 77381

\* \* \*

Full name of second joint inventor, if any:

DOMINIC

MAN-KIT

LAM

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

FAMILY (OR LAST NAME)

Inventor's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Country of Citizenship: U.S.A.

Residence: The Woodlands, Texas

Post Office Address: 9 Wedgewood Glen, The Woodlands, Texas 77381

\* \* \*

Full name of third joint inventor, if any:

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

FAMILY (OR LAST NAME)

Inventor's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH  
FORM A PART OF THIS DECLARATION

- ☐ Signature for fourth and subsequent joint inventors. Number of pages added: \_\_

\* \* \*

- ☐ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added \_\_\_\_\_

\* \* \*

- ☐ Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added \_\_\_\_\_

\* \* \*

- ☐ Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time (37 CFR 1.47).

\* \* \*

- ☒ Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (C-I-P) application.

☒ Number of pages added 1

\* \* \*

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\* \* \*

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AUG-09-1995 12:38

LM CONLEY ROSE & TAYLOR

TO

914897685431

P.16

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

Full name of sole or first inventor:

CHARLES ROE ABETZER  
FIRST NAME MIDDLE INITIAL OR NAME FAMILY (OR LAST) NAME

Inventor's signature: \_\_\_\_\_

Date: \_\_\_\_\_ Country of Citizenship: U.S.A.

Residence: The Woodlands, Texas

Post Office Address: 58 Bridgeway, The Woodlands, Texas 77381

...

Full name of second joint inventor, if any:

DOMINIC MAN-KIT LAM  
FIRST NAME MIDDLE INITIAL OR NAME FAMILY (OR LAST) NAME

Inventor's signature: *Domini*

Date: 8-10-95 Country of Citizenship: U.S.A.

Residence: The Woodlands, Texas

Post Office Address: 5 Wedgwood Glen, The Woodlands, Texas 77381

...

Full name of third joint inventor, if any:

\_\_\_\_\_  
FIRST NAME MIDDLE INITIAL OR NAME FAMILY (OR LAST) NAME

Inventor's signature: \_\_\_\_\_

Date: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

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☐ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added \_\_\_\_\_

\* \* \*

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